

Electronic Proof of Claim_DXRSR27369[[CSA#4214#CF]]

Final Audit Report

2022-10-17

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"Electronic Proof of Claim_DXRSR27369[[CSA#4214#CF]]" History

-  Web Form created by Puerto Rico Claims (prclaims@ra.kroll.com)
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-  /s/Monique Diaz-Mayoral (m@diazmayorallaw.com) uploaded the following supporting documents:
 -  Attachment
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-  Web Form filled in by /s/Monique Diaz-Mayoral (m@diazmayorallaw.com)
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-  Agreement completed.
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UNITED STATES DISTRICT COURT FOR THE DISTRICT OF PUERTO RICO / TRIBUNAL DE DISTRITO DE LOS ESTADOS UNIDOS PARA EL
DISTRITO DE PUERTO RICO

Fill in this information to identify the case (Select only one Debtor per claim form). /
Llene esta información para identificar el caso (seleccione sólo un deudor por formulario de reclamación).

<input checked="" type="checkbox"/> Commonwealth of Puerto Rico El Estado Libre Asociado de Puerto Rico	Case No. 17-bk-03283	Petition Date: May 3, 2017
<input type="checkbox"/> Puerto Rico Sales Tax Financing Corporation (COFINA) La Corporación del Fondo de Interés Apremiante de Puerto Rico	Case No. 17-bk-03284	Petition Date: May 5, 2017
<input type="checkbox"/> Puerto Rico Highways and Transportation Authority La Autoridad de Carreteras y Transportación de Puerto Rico	Case No. 17-bk-03567	Petition Date: May 21, 2017
<input type="checkbox"/> Employees Retirement System of the Government of the Commonwealth of Puerto Rico El Sistema de Retiro de los Empleados del Gobierno del Estado Libre Asociado de Puerto Rico	Case No. 17-bk-03566	Petition Date: May 21, 2017
<input type="checkbox"/> Puerto Rico Electric Power Authority La Autoridad de Energía Eléctrica de Puerto Rico	Case No. 17-bk-04780	Petition Date: July 2, 2017

Modified Official Form 410 / Formulario Oficial 410 Modificado

Proof of Claim / Evidencia de reclamación

04/16

Read the instructions before filling out this form. This form is for making a claim for payment in a Title III case. Do not use this form to make a request for payment of an administrative expense, other than a claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9). Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy or subject to confidentiality on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

Lea las instrucciones antes de completar este formulario. Este formulario está diseñado para realizar una reclamación de pago en un caso en virtud del Título III. No utilice este formulario para solicitar el pago de un gasto administrativo que no sea una reclamación que reúna los requisitos para ser tratada como prioridad administrativa conforme al Título 11 § 503(b) (9) del U.S.C. Ese tipo de solicitud debe realizarse de conformidad con el Título 11 § 503 del U.S.C.

Quienes presenten la documentación deben omitir o editar información que reúna los requisitos para ser tratada con privacidad o confidencialidad en este formulario o en cualquier otro documento adjunto. Adjunte copias editadas de cualquier otro documento que respalde la reclamación, tales como pagarés, órdenes de compra, facturas, balances detallados de cuentas en funcionamiento, contratos, resoluciones judiciales, hipotecas y acuerdos de garantías. No adjunte documentos originales, ya que es posible que los documentos adjuntos se destruyan luego de analizarlos. En caso de que los documentos no estén disponibles, explique los motivos en un anexo.

Fill in all the information about the claim as of the Petition Date.

Complete toda la información acerca de la reclamación a la fecha en la que se presentó el caso.

Part 1 / Parte 1

Identify the Claim / Identificar la reclamación

1. Who is the current creditor?

¿Quién es el acreedor actual?

Empresas Omajede Inc.

Name of the current creditor (the person or entity to be paid for this claim)
Nombre al acreedor actual (la persona o la entidad a la que se le pagará la reclamación)

Other names the creditor used with the debtor
Otros nombres que el acreedor usó con el deudor

2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. From whom? Sí. ¿De quién? _____	
3. Where should notices and payments to the creditor be sent?	Where should notices to the creditor be sent? ¿A dónde deberían enviarse las notificaciones al acreedor? Empresas Omajede Inc. 1608 Calle Bori, Suite 218 San Juan, PR 00927 ¿A dónde deberían enviarse las notificaciones al acreedor? Norma federal del procedimiento de quiebra (FRBP, por sus siglas en inglés) 2002(g)	Where should payments to the creditor be sent? (if different) ¿A dónde deberían enviarse los pagos al acreedor? (En caso de que sea diferente) Empresas Omajede Inc. 1608 Calle Bori, Suite 218 San Juan, PR 00927
	787-766-0872 Contact phone / Teléfono de contacto eoinc@zellius.net Contact email / Correo electrónico de contacto	787-766-0872 Contact phone / Teléfono de contacto eoinc@zellius.net Contact email / Correo electrónico de contacto
4. Does this claim amend one already filed?	<input type="checkbox"/> No / No <input checked="" type="checkbox"/> Yes. Claim number on court claims registry (if known) Sí. Número de reclamación en el registro de reclamaciones judiciales (en caso de saberlo) <u>21372; 70324</u> Filed on / Presentada el <u>05/25/2018; 06/25/2018</u> (MM/DD/YYYY) / (DD/MM/AAAA)	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. Who made the earlier filing? Sí. ¿Quién hizo la reclamación anterior? _____	
¿Sabe si alguien más presentó una evidencia de reclamación para esta reclamación?		

Part 2 / Parte 2:

Give Information About the Claim as of the Petition Date

Complete toda la información acerca de la reclamación desde la fecha en la que se presentó el caso.

6. Do you have a claim against a specific agency or department of the Commonwealth of Puerto Rico?	<input type="checkbox"/> No / No <input checked="" type="checkbox"/> Yes. Identify the agency or department and contact name. (A list of Commonwealth of Puerto Rico agencies and departments is available at: https://cases.primeclerk.com/puertorico/) Sí. Identifique el organismo o departamento y nombre del representante. (Una lista de agencias y departamentos del Estado Libre Asociado de Puerto Rico está disponible en: https://cases.primeclerk.com/puertorico/).
¿Tiene una reclamación en contra de algún organismo o departamento específico del Estado Libre Asociado de Puerto Rico?	Public Service Commission _____
7. Do you supply goods and / or services to the government?	<input type="checkbox"/> No / No <input checked="" type="checkbox"/> Yes. Provide the additional information set forth below / Sí. Proporcionar la información adicional establecida a continuación: ¿Proporciona bienes y / o servicios al gobierno?
	Vendor / Contract Number Número de proveedor / contrato: <u>xx-xxx9044/#2011-000009</u>
	List any amounts due after the Petition Date (listed above) but before June 30, 2017: Anote la cantidad que se le debe después de la fecha que se presentó el caso (mencionados anteriormente), pero antes del 30 de junio de 2017 \$ <u>66,666.66</u>

8. How much is the claim? ¿Cuál es el importe de la reclamación?	\$ 338,503.37	. Does this amount include interest or other charges? ¿Este importe incluye intereses u otros cargos? <input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A). Sí. Adjunte un balance con intereses detallados, honorarios, gastos u otros cargos exigidos por la Norma de Quiebras 3001(c)(2)(A).
9. What is the basis of the claim? ¿Cuál es el fundamento de la reclamación?	Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card. Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c). Limit disclosing information that is entitled to privacy, such as health care information. Por ejemplo: Venta de bienes, préstamo de dinero, arrendamiento, prestación de servicios, lesiones personales u homicidio culposo, o tarjetas de crédito. Adjunte copias editadas de cualquier documento que respalte la reclamación conforme a lo exigido por la Norma de Quiebras 3001(c). Limite la divulgación de información que reúne los requisitos para ser tratada con privacidad, tal como información sobre atención médica. Claim is for past due rent of lease of commercial space (see attached statement for additional details).	
10. Is all or part of the claim secured? ¿La reclamación está garantizada de manera total o parcial?	<input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. The claim is secured by a lien on property. Sí. La reclamación está garantizada por un derecho de retención sobre un bien. Nature of property / Naturaleza del bien: <input type="checkbox"/> Motor vehicle / Vehículos <input type="checkbox"/> Other. Describe: Otro. Describir: _____ Basis for perfection / Fundamento de la realización de pasos adicionales: Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.) Adjunte copias editadas de documentos, si los hubiere, que demuestre la realización de pasos adicionales para hacer valer un derecho de garantía (por ejemplo, una hipoteca, un derecho de retención, un certificado de propiedad, una declaración de financiamiento u otro documento que demuestre que se ha presentado o registrado un derecho de retención).	
	Value of property / Valor del bien: \$ _____ Amount of the claim that is secured / Importe de la reclamación que está garantizado: \$ _____ Amount of the claim that is unsecured / Importe de la reclamación que no está garantizado: / \$ _____ (The sum of the secured and unsecured amounts should match the amount in line 7.) (La suma del importe garantizado y no garantizado debe coincidir con el importe de la línea 7.) Amount necessary to cure any default as of the Petition Date / Importe necesario para compensar toda cesación de pago a la fecha que se presentó el caso : \$ _____ Annual Interest Rate (on the Petition Date) Tasa de interés anual (cuando se presentó el caso) _____ % <input type="checkbox"/> Fixed / Fija <input type="checkbox"/> Variable / Variable	
11. Is this claim based on a lease? ¿Esta reclamación está basada en un arrendamiento?	<input type="checkbox"/> No / No <input checked="" type="checkbox"/> Yes. Amount necessary to cure any default as of the Petition Date. Sí. Importe necesario para compensar toda cesación de pago a partir de la que se presentó el caso \$ _____ 338,503.37	

<p>12. Is this claim subject to a right of setoff?</p> <p>¿La reclamación está sujeta a un derecho de compensación?</p>	<input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. Identify the property / Sí. Identifique el bien: _____
<p>13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?</p> <p>¿La reclamación, total o parcial, cumple los requisitos para ser tratada como prioridad administrativa conforme al Título 11 § 503(b)(9) del U.S.C.?</p>	<input checked="" type="checkbox"/> No / No <input type="checkbox"/> Yes. Indicate the amount of your claim arising from the value of any goods received by the debtor within 20 days before the Petition Date in these Title III case(s), in which the goods have been sold to the debtor in the ordinary course of such debtor's business. Attach documentation supporting such claim. Sí. Indique el importe de la reclamación que surge del valor de cualquier bien recibido por el deudor dentro de los 20 días anteriores a la fecha de inicio en estos casos del Título III, en el que los bienes se han vendido al deudor en el transcurso normal de los negocios del deudor. Adjunte la documentación que respalda dicha reclamación.

Part 3 / Parte 3:

Sign Below / Firmar a continuación

The person completing this proof of claim must sign and date it.
FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

La persona que complete esta evidencia de reclamación debe firmar e indicar la fecha.
FRBP 9011(b).

Si presenta esta reclamación de manera electrónica, la FRBP 5005(a)(2) autoriza al tribunal a establecer normas locales para especificar qué se considera una firma.

Check the appropriate box / Marque la casilla correspondiente:

- I am the creditor. / Soy el acreedor.
- I am the creditor's attorney or authorized agent. / Soy el abogado o agente autorizado del acreedor.
- I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004. / Soy el síndico, el deudor o su agente autorizado. Norma de quiebra 3004.
- I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005. / Soy el garante, fiador, endosante u otro codeudor. Norma de quiebra 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

Comprendo que una firma autorizada en esta *Evidencia de reclamación* se considera como un reconocimiento de que al calcular el importe de la reclamación, el acreedor le proporcionó al deudor crédito para todo pago recibido para saldar la deuda

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

He leído la información en esta *Evidencia de reclamación* y tengo motivos razonables para suponer que la información es verdadera y correcta.

I declare under penalty of perjury that the foregoing is true and correct. / Declaro bajo pena de perjurio que lo que antecede es verdadero y correcto.

Signature: /s/Monique Diaz-Mayoral
/s/Monique Diaz-Mayoral (Oct 17, 2022 06:38 EDT)

Signature / Firma _____

Email: m@diazmayorallaw.com

Print the name of the person who is completing and signing this claim / Escriba en letra de imprenta el nombre de la persona que completa y firma esta reclamación:

Name _____

Monique

Diaz-Mayoral

First name / Primer nombre _____

Middle name / Segundo nombre _____

Last name / Apellido _____

Title / Cargo _____

Attorney

Company / Compañía _____

Identify the corporate servicer as the company if the authorized agent is a servicer.
 Identifique al recaudador corporativo como la compañía si el agente autorizado es un recaudador.

Address / Dirección _____

PO Box 364134

Street / Calle _____

San Juan

PR 0936-4134

City / Ciudad _____

State / Estado _____ ZIP Code / Código postal _____

Contact phone / Teléfono de contacto **754-755-5508**

Email / Correo electrónico **m@diazmayorallaw.com**

Attach Supporting Documentation (limited to a single PDF attachment that is less than 5 megabytes in size and under 100 pages):

I have supporting documentation.
(attach below)

I do not have supporting documentation.



PLEASE REVIEW YOUR PROOF OF CLAIM AND SUPPORTING DOCUMENTS AND REDACT ACCORDINGLY PRIOR TO UPLOADING THEM. PROOFS OF CLAIM AND ATTACHMENTS ARE PUBLIC DOCUMENTS THAT WILL BE AVAILABLE FOR ANYONE TO VIEW ONLINE.

IMPORTANT NOTE REGARDING REDACTING YOUR PROOF OF CLAIM AND SUPPORTING DOCUMENTATION When you submit a proof of claim and any supporting documentation you must show only the last four digits of any social-security, individual's tax-identification, or financial-account number, only the initials of a minor's name, and only the year of any person's date of birth. If the claim is based on the delivery of health care goods or services, limit the disclosure of the goods or services so as to avoid embarrassment or the disclosure of confidential health care information.

A document has been redacted when the person filing it has masked, edited out, or otherwise deleted, certain information. The responsibility for redacting personal data identifiers (as defined in Federal Rule of Bankruptcy Procedure 9037) rests solely with the party submitting the documentation and their counsel. Prime Clerk and the Clerk of the Court will not review any document for redaction or compliance with this Rule and you hereby release and agree to hold harmless Prime Clerk and the Clerk of the Court from the disclosure of any personal data identifiers included in your submission. In the event Prime Clerk or the Clerk of the Court discover that personal identifier data or information concerning a minor individual has been included in a pleading, Prime Clerk and the Clerk of the Court are authorized, in their sole discretion, to redact all such information from the text of the filing and make an entry indicating the correction.

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF PUERTO RICO

In Re:

THE FINANCIAL OVERSIGHT AND
MANAGEMENT BOARD FOR PUERTO RICO

as a representative of
THE COMMONWEALTH OF PUERTO RICO
et al.

Debtors.¹

PROMESA Title III

No.: 17-BK-3283-LTS
(Jointly Administered)

**This filing relates to the
Commonwealth.**

STATEMENT IN SUPPORT OF CLAIM

I. NATURE OF THE CLAIM

1. This is a claim for past due rent due to Empresas Omajede Inc. related to a Lease Agreement for the building. The Public Service Commission's unpaid balance related to the lease, as of the commencement of the Commonwealth's Title III proceeding was \$338,503.37. This proof of claim supplements a previously filed amended claim with respect to 17 BK 03283-LTS and the Commonwealth Debtor, which also asserted a claim for \$338,503.37. The supplementation is limited to adding to the documents supporting the claim with English Translations of the Lease documents and adding this statement as a written explanation of the basis for the claim.

¹ The Last Four Digits of the Federal Tax ID of the Commonwealth of Puerto Rico (the Debtor in Bankruptcy Case No. 17- BK-3283 (LTS)) is 3481.

II. RELEVANT FACTS

2. The Public Service Commission (known in Spanish as “La Comisión de Servicio Público”) is an agency of the Commonwealth of Puerto Rico and for whom the Commonwealth is liable. *See Exhibit 1*, Lease Agreement.

3. On March 9, 2011, the Public Service Commission signed a lease agreement titled “*Contrato de Arrendamiento de Locales por Cinco Años hasta Treinta Años*” in Spanish, which is translated to English as *Lease Agreement of Locals for Five Years to Thirty Years*. *See Exhibit 1-A*, Lease Agreement.

4. On March 9, 2011, Contract #2011-000009 was filed with the Office of the Comptroller of Puerto Rico. *See Exhibit 1-B*, Lease Agreement Registration.

5. On August 1, 2011, the Public Service Commission signed a “Documento de Aceptación y Toma de Posesión del Local La Electrónica-Anejo I al Contrato 2011-000009” in Spanish, which is translated to English as *Document of Acceptance and Taking Possession of Local -Exhibit I to Contract #2011-000009*. *See Exhibit 2-A*, Acceptance to Take Possession.

6. On August 1, 2011, Contract #2011-000009 was filed with the Office of the Comptroller of Puerto Rico. *See Exhibit 2-B*, Acceptance Registration.

7. On September 7, 2012, the Public Service Commission signed a “*Enmienda al Contrato 2011-000009, para cumplir con la Cláusula de Amortización de Mejoras. Se Aneja Como Parte Integral del Contrato Original Núm. 2011-000009*.” in Spanish, which is translated to English as *Amendment to Contract #2011-000009*,

to Comply with the Improvements Amortization Clause. Attached as an Integral Part of the Original Contract #2011-000009. See Exhibit 3-A, Lease Amendment.

8. On September 7, 2012, the Amendment to Contract #2011-000009 was filed with the Office of the Comptroller of Puerto Rico. *See Exhibit 3-B, Lease Amendment Registration.*

9. On May 3, 2017, the Oversight Board issued a restructuring certification pursuant to PROMESA sections 104(j) and 206 and filed a voluntary petition for relief for the Commonwealth of Puerto Rico (the “Commonwealth”) pursuant to PROMESA section 304(a), commencing a case under Title III thereof (the “Commonwealth Title III Case”). Dkt. 1

10. The Commonwealth’s PROMESA Title III case stayed all of Empresas Omajede’s collection actions. Dkt. 1

11. On June 13, 2017, the Public Service Commission handed back the keys and sent a letter by Email to Empresas Omajede to confirm the handover of the keys, which is when the turnover of the possession of the leased space occurred. *See Exhibit 4, First Letter and Exhibit 5, Second Letter.*

12. The first letter (dated June 13, 2017) states that, even though the Public Service Commission had unoccupied the building, the keys had not been returned and requested instructions as to the return of the keys. *See Exhibit 4, First Letter.*

13. A second letter (also dated June 13, 2017) states that the return of the keys is confirmed therein. *See Exhibit 5, Second Letter.*

14. The Public Service Commission's unpaid balance related to the lease, as of the commencement of the Commonwealth's Title III proceeding was \$338,503.37.

See Exhibit 6, Excel Table.

15. The first proof of claim filed on 05/25/18 by Empresas Omajede (the "Initial POC") is for a claim in the amount of \$338,503.37 related to debt incurred by the Commonwealth as a result of the Public Service Commission entering into a lease agreement for the rental of the "La Electrónica" building (Claim #21372). The Initial POC (Claim #21372) is listed in the Claims Register under the enumeration # 1539-1.

1. *See Exhibit 7*, Claim #21372, which is listed in the Claims Register under # 1539-1.

16. The second proof of claim filed on 06/25/18 by the Empresas Omajede (the "First Amended POC") is for a claim in the amount of \$338,503.37 related to debt incurred by the Commonwealth as a result of the Public Service Commission entering into a lease agreement for the rental of the "La Electrónica" building (Claim #70324). It is an amended claim, that amends the Initial POC (Claim #21372). The First Amended POC (Claim #70324) is listed in the Claims Register as Claim # 1539-2, which reflects that it is an amended claim related to the Initial POC. *See Exhibit 8*, Claim #70324, which is listed in the Claims Register under # 1539-2.

17. This is the third proof of claim on 10/17/22 filed by Empresas Omajede (the "Second Amended POC"), which is also a claim in the amount of \$338,503.37 related to debt incurred by the Commonwealth as a result of the Public Service

Commission entering into a lease agreement for the rental of the “La Electrónica” building. It is an amended claim, that amends the First Amended POC (Claim #70324). It supplements the supporting documentation adding the English translations of the Lease documents and adding this statement as a written statement regarding the basis for the claim.

RESPECTFULLY SUBMITTED.

In San Juan, PR, this 17th day of October, 2022.

*DML | Diaz Mayoral Law
Attorney for ESJ Towers Condominium
Homeowners Association*

s/ Monique Diaz Mayoral
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San Juan, PR 00901
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